

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S-2		08-21-01
O.I.P.E. CLASSIFIER		4/3	8/27/01
FORMALITY REVIEW	H.T.	11/7	10/11/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected

= ..... Allowed

— (Through numeral)... Canceled

÷ ..... Restricted

N ..... Non-elected

I ..... Interference

A ..... Appeal

O ..... Objected

Claim	Date			
Final	Original			
1	✓			
2	✓			
3	✓			
4	0			
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Claim	Date			
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If more than 150 claims or 10 actions  
staple additional sheet here